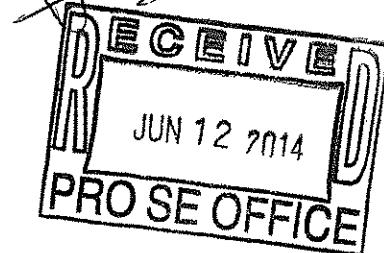


UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKTristan Trevor Atkinson

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Bill William Henry Gates; George Bush Junior  
Barack Obama14-CV-4680  
COMPLAINTJury Trial:  Yes  No  
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

**I. Parties in this complaint:**

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Tristan Trevor Atkinson  
 Street Address 1741 Baynton Avenue  
 County, City Bronx  
 State & Zip Code New York 10472  
 Telephone Number 1 (718) 991-3159

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name Bill William Henry Gates  
 Street Address 1535 73rd Avenue

County, City Washington  
 State & Zip Code Nevada  
 Telephone Number \_\_\_\_\_

Defendant No. 2 Name George Bush Junior  
 Street Address 2943 SMU Boulevard  
 County, City Dallas  
 State & Zip Code Texas 75205  
 Telephone Number \_\_\_\_\_

Defendant No. 3 Name Barack Obama  
 Street Address 1600 Pennsylvania Avenue NW  
 County, City Washington DC  
 State & Zip Code Washington DC Pennsylvania 20500  
 Telephone Number \_\_\_\_\_

Defendant No. 4 Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_  
 Telephone Number \_\_\_\_\_

#### II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (check all that apply)

Federal Questions       Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? My 1<sup>st</sup> Amendment right, My 8<sup>th</sup> Amendment right, Right to a  
Civil and Unusual punishment, My 14<sup>th</sup> amendment rights, Assault,  
Sodomy

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship \_\_\_\_\_

Defendant(s) state(s) of citizenship \_\_\_\_\_

#### III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? In the United States of America  
Bronx New York, Bronx Hospital

B. What date and approximate time did the events giving rise to your claim(s) occur? From 2007-2014

C. Facts: I was ~~enslaved~~ by Bill Gates and his homes technological corporations. I was shaken into Seizure like symptoms and forced to confess about my sex life, former mental illness and my private life. My body was being over heated and stricken with cold year round. And my penis suffered dismemberment. I was being told things like if I don't give up my love and become a police officer to correct his dissatisfaction with me he would follow me until I was hospitalized for life or killed by his technologies capabilities - Bill Gates shook my body uncontrollably until I wound up hospitalized and diagnosed with schizophrenia effectiveness. George Bush's use of the technology due to his contract with Bill Gates for his use of the technology has send my right testicle causing a tremendous amount of pain in my sleep. Barack Obama Sustained me with his new strengthened contract with ~~Bill Gates~~ technology during my evaluation for a job I was on in Riverdale New York and in my sleep causing me great discontent and failure to complete my job evaluation. The C.I.A. and Secret Service were involved. The mental rehabilitation staff at Jersid Hospital saw what happened to me. My counselor and my doctors saw what happened to me.

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

#### IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. I require ~~no~~ day treatment at the Bronx mental rehabilitation day treatment center. I require a daily evaluation for my feet being over heated during my exercise and am currently on I'm currently on psychotropic medication.

**V. Relief:**

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation. I want \$75,000.00 of U.S. american currency. ~~And I want the court to not allow Bill Gates or any future public official dignitary elected official, staff armed forces personnel or elected phone representative or citizen of the world ~~to~~ of any government agency there in, about and/or above to ever use or be able to use this technology on me or any citizen of the world ever again.~~

---

---

---

---

---

---

---

**I declare under penalty of perjury that the foregoing is true and correct.**

Signed this 12 day of June, 2014.

Signature of Plaintiff

Quinton Atkinson

Mailing Address

1241 Baynton Avenue 10472  
Bronx, New York

Telephone Number

(1718)901-3156

Fax Number (if you have one)

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

**For Prisoners:**

I declare under penalty of perjury that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

\_\_\_\_\_

Inmate Number

\_\_\_\_\_